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FORM D

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:	May 31, 2005					
Estimated average burden						
hours per respo	onse 16.00					

SEC USE ONLY						
Prefix	Serial					
DATE RECEIVED						

NightWatch Capital Partners, LP: Limited Partnership Interest Offering	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	03020932
1. Enter the information requested about the issuer	0302033=
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) NightWatch Capital Partners, LP	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
3311 North University Avenue, Provo, UT 84604	801-805-1300
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Investment limited partnership	PROCESSI
Type of Business Organization	MAY 28 200
<i>7</i> .	lease specify):
business trust limited partnership, to be formed	THOMSON FINANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	nated
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplement be filed with the SEC.	
Filing Fee: There is no federal filing fee.	

- ATTENTION -

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

SEC 1972 (6-02)

this notice and must be completed.

State:

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
 Each promoter of the issuer, if the issuer has been organized within the past five years;
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issue.
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer Director General and/or Nemelka, John Fritzen
Full Name (Last name first, if individual)
3311 North University Avenue, Provo, UT 84604
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Y General and/or
NightWatch Capital Management, LLC Managing Partner
Full Name (Last name first, if individual) 3311 North University Avenue, Provo, UT 84604
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or
NightWatch Capital Advisors, LLC
Full Name (Last name first, if individual)
3311 North University Avenue, Provo, UT 84604 Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Nightwatch Capital Group, LLC
Full Name (Last name first, if individual) 3311 North University Avenue, Provo, UT 84604
Business or Residence Address (Number and Street, City, State, Zip Code)
business of Residence Aduless (Number and Street, City, State, 219 Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or
NightWatch Management, LLC Managing Partner
Full Name (Last name first, if individual)
3311 North University Avenue, Provo, UT 84604
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or
JFN Management, LLC Managing Partner
Full Name (Last name first, if individual)
3311 North University Avenue, Provo, UT 84604
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)
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				В. 1	NFORMA	FION ABO	UT OFFER	ING				
1. Has th	e issuer sol	d. or does t	he issuer i	ntend to se	ell, to non-	accredited	investors i	n this offe	ring?		Yes	No X
		,			n Appendi:				-			•
2. What is the minimum investment that will be accepted from any individual?						\$ <u>1,0</u>	00,000*					
*Minimum investment amount may be waived in the discretion of the general partner. 3. Does the offering permit joint ownership of a single unit?							Yes	No X				
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. N/A							ç. e					
Full Name	(Last name	first, if ind	ividual)									
Business or	Residence	Address (N	lumber and	d Street, C	ity, State,	Zip Code)	-					
Name of A	ssociated B	roker or De	aler									
States in W	hich Person	Listed Ha	Solicited	or Intend	s to Solicit	Purchasers	3					
(Check	"All State	s" or check	individual	States)			***************************************		••••••	,	☐ Al	l States
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)					·····	
Name of A	ssociated B	oker or De	aler						<u></u>			
States in W	hich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State:	" or check	individual	States)		•···•	•••••				☐ Ai	l States
AL IL MT RI	IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full Name	(Last name	first, if indi	vidual)									
Business o	r Residence	Address (N	Number an	d Street, C	city, State,	Zip Code)						
Name of As	ssociated B	oker or Dea	aler		<u> </u>							
States in W	hich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check "All States" or check individual States)								States				
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount alreads sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and	ζ.	
	already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0-	\$0-
	Equity	\$ -0-	\$ -0-
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$ -0-	\$ - 0-
	Partnership Interests		\$1,700,000
	Other (Specify)		
	Total		\$1,700,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	;	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	3	\$1,700,000
	Non-accredited Investors	0-	\$0-
	Total (for filings under Rule 504 only)	_N/A	\$N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	-	\$N/A
	Regulation A		\$N/A
	Rule 504		\$N/A
	Total	N/A	\$N/A
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	,	
	Transfer Agent's Fees		s <u>-0-</u>
	Printing and Engraving Costs		s <u>-0-</u>
	Legal Fees		\$20,000
	Accounting Fees		\$0-
	Engineering Fees		\$0-
	Sales Commissions (specify finders' fees separately)		\$ <u>-0</u> -
	Other Expenses (identify) travel and marketing	_	\$17,000
	Total		\$37,000
		_	

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	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		<u>\$ 1,663,000</u>				
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.						
		Payments to Officers, Directors, & Affiliates	Payments to Others				
	Salaries and fees] \$0-	□ \$ <u>-0÷</u>				
	Purchase of real estate]\$ <u>-0-</u>	□\$ <u>-0-</u>				
	Purchase, rental or leasing and installation of machinery and equipment]\$0	□\$ <u>-0</u> -				
	Construction or leasing of plant buildings and facilities]\$ <u></u> 0	□ \$ <u>-</u> 0-				
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	7 e					
	Repayment of indebtedness	- •	□ \$0-				
	Working capital						
	Other (specify): Management Fees and Due Diligence		\$ 25,000				
		4 <u>503000</u>					
	Acquisition of Securities	s <u>-0-</u>	\$ <u>1,578,000</u>				
	Column Totals	\$ <u>60,000</u>	\$1,603,000				
	Total Payments Listed (column totals added)	_ s <u>1,€</u>	563,000				
	d. tedaral signature (, , etc "						
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.							
Issu	er (Print or Type) Signature D	ate					
Nig	ghtWatch Capital Advisors. LIC LLS. Nousley	May 27.20	£0				
Nan	ne of Signer (Print or Type) Title of Signer (Print or Type)	J					
Joh	nn F. Nemelka Managing Principal of General Partner	^					

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)